

66/11/99
JC530 U.S. PTO

PC10015AJTJ

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

JC530 U.S. PTO
09/248438
02/11/99

REQUEST FOR FILING AND
TRANSMITTAL OF UTILITY PATENT APPLICATION
PURSUANT TO 37 C.F.R. §1.51 ET SEQ

Sir:

This is a request for filing the utility patent application, transmitted herewith, of

Inventor: Murray C. Maytom and Ian H. Osterloh

Title: Method of Treating Impotence Due to Spinal Cord Injury

Enclosed are also:

- ☐ _____ sheets of drawing(s).
- ☐ An assignment of the invention to _____
(Fee for recordal of assignment, pursuant to 37 C.F.R. § 1.21(h), \$40.00).
- ☐ A certified copy of a _____
application.
- ☐ A Disclosure Statement, Form FB-A820, and copy(ies) of the reference(s) cited.

XX This application is based on United States Provisional Application No.
60/075,580 filed February 23, 1998 the priority of which is hereby claimed.

XX This application is being filed without a Declaration and Power of Attorney.
The undersigned attorney/agent has been authorized to file the subject
application on behalf of the inventor(s).

XX All correspondence should be sent to Gregg C. Benson, Pfizer Inc., Eastern
Point Road, Box 519, Groton, CT 06340.

The inventors are:

(name) Murray C. Maytom

a resident of (city, state, country) Sandwich, Kent, England

and a citizen of (country) Republic of Ireland

EXPRESS MAIL NO. EE25782474 US

09248438 "021199"

(name) Ian H. Osterloh

a resident of (city, state, country) Sandwich, Kent, England

and a citizen of (country) Great Britain

BASIC APPLICATION FEE:

\$760.00

CLAIMS FEES:

CLAIMS AS FILED

Total Claims	<u>10</u>	-20=	<u>0</u>	x \$18.00	<u>0.00</u>
Independent Claims	<u>2</u>	- 3=	<u>0</u>	x \$78.00	<u>0.00</u>
<input type="checkbox"/> Multiple Dependent Claim(s) fee				\$260.00	<u>0.00</u>
Total Filing Fee					<u>760.00</u>

☒ Please charge Deposit Account No. 16-1445 in the amount of \$760.00. Two copies of this paper are enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required under 37 C.F.R. §§ 1.16 and 1.17 by the filing of this paper, or credit any overpayment, to Deposit Account No 16-1445. Two copies of this paper are enclosed.

Respectfully submitted,

Date: FEBRUARY 11, 1999

James T. Jones
James T. Jones
Attorney for Applicant(s)
Reg. No. 30,561

Pfizer Inc.
Patent Department, Box 519
Eastern Point Road
Groton, CT 06340
(860) 441-4903

09248430-0311260

CERTIFICATE OF MAILING - EXPRESS MAIL

PFIZER DOCKET NO: PC10015AJTJ

APPLICATION NUMBER: To Be Assigned

TITLE: Method of Treating Impotence Due to Spinal Cord Injury

APPLICANT: Murray C. Maytom et al



"Express Mail" mailing label number EE279782474US

Date of Deposit February 11, 1999

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

Patricia Botelho

(Typed or printed name of person mailing paper or fee)

A handwritten signature in black ink, appearing to be "P. Botelho", written over a horizontal line.

(Signature of person mailing paper or fee)

Pfizer Inc.
Patent Department, Box 519
Eastern Point Road
Groton, CT 06340

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